

# **Attention:**

**Story County Sheriff's Office Applications will only be accepted when there is an active job posting. When applying for an active job position please be sure to use the following Sheriff Application, other applications will not be accepted.**

**We also invite you to sign up on the website to receive job posting notices when they become available. To do so, go the Citizen Help Center block located on the home page of Story County's website, click on Notify Me, and go to Government Jobs/Law Enforcement Jobs.**

**Thank you for your interest in the Story County Sheriff's Office.**

**Paul H. Fitzgerald  
Story County Sheriff**



## STORY COUNTY SHERIFF'S OFFICE APPLICATION FOR EMPLOYMENT

Applications must be typewritten or clearly printed in ink; illegible applications will not be processed. All questions must be answered and any accompanying documents received prior to processing. If not applicable, indicate N/A (not applicable). If space provided is not sufficient for complete answers or you wish to furnish additional information, attach sheets of the same size as this application and number the sheets to correspond with the questions.

All qualified applications will receive consideration without unlawful discrimination because of race, creed, religion, color, sex, sexual orientation, gender identity, age, national origin or disability.

Last Name	First		Middle
Street Address	Are you at least 18 years of age?  Yes      No		Do you have a legal right to work in the United State full-time?  Yes      No
City/Town	State	Zip Code:	Telephone Number(s) (    )  (    )  Cell Phone: (    )
Position you are applying for: (Maximum of 2)  <div style="display: flex; justify-content: space-between;"> <span>____ Deputy Sheriff</span> <span>____ Detention Officer</span> <span>____ Clerical</span> </div> <div style="display: flex; justify-content: space-between;"> <span>____ Telecommunicator</span> <span>____ Reserve Deputy</span> <span>____ Jail Cook</span> </div> <div>____ Other _____</div>			E-mail Address:      Date Available to Start:
Have you ever been employed by Story County?      Yes      No  If yes, give dates you were employed:		Position	Reason for Leaving
Have you taken the Civil Service Examination within the last 12 months?      Yes _____ No _____		If so list date/s:	What location/locations in Iowa? _____

List all of the formal education that you have completed. Use a separate sheet of paper if you need additional space.

Name/Location	Did You Graduate?	Major Subject
High School(s)	<p>YES _____ NO _____</p> <p>If no, list the highest level completed:</p>	
College/Trade School(s)	<p>YES _____ NO _____</p> <p>If no, list the highest level completed:</p>	
College/Trade School(s)	<p>YES _____ NO _____</p> <p>If no, list the highest level completed:</p>	

Please list four references: (please do not list relatives or current or past employers)

<p>Complete Name _____</p> <p>Occupation _____</p> <p>How long have you known them _____ years.</p> <p>How acquainted:</p>	<p>Address: _____</p> <p>Home Phone: _____</p> <p>Work Address/Phone: _____</p> <p>E-mail Address: _____</p>
<p>Complete Name _____</p> <p>Occupation _____</p> <p>How long have you known them _____ years.</p> <p>How acquainted:</p>	<p>Address: _____</p> <p>Home Phone: _____</p> <p>Work Address/Phone: _____</p> <p>E-mail Address: _____</p>
<p>Complete Name _____</p> <p>Occupation _____</p> <p>How long have you known them _____ years.</p> <p>How acquainted:</p>	<p>Address: _____</p> <p>Home Phone: _____</p> <p>Work Address/Phone: _____</p> <p>E-mail Address: _____</p>
<p>Complete Name _____</p> <p>Occupation _____</p> <p>How long have you known them _____ years.</p> <p>How acquainted:</p>	<p>Address: _____</p> <p>Home Phone: _____</p> <p>Work Address/Phone: _____</p> <p>E-mail Address: _____</p>

Starting with your most recent job, list your employment history for the past 10 years. Account for any time period that you were unemployed by stating the nature of your activities. Use back or separate sheet of paper if necessary.

Employer:  Telephone #: (    )	Dates:		Pay level per year::
	From:	To:	
Address:	Job Title:	Describe your duties:	
City, State, Zip Code	Supervisor's Name:	Reason for leaving:	

  

Employer:  Telephone #: (    )	Dates:		Pay level per year:
	From:	To:	
Address:	Job Title:	Describe your duties:	
City, State, Zip Code	Supervisor's Name:	Reason for leaving:	

  

Employer:  Telephone #: (    )	Dates:		Pay level per year:
	From:	To:	
Address:	Job Title:	Describe your duties:	
City, State, Zip Code	Supervisor's Name:	Reason for leaving:	

  

Employer:  Telephone #: (    )	Dates:		Pay level per year:
	From:	To:	
Address:	Job Title:	Describe your duties:	
City, State, Zip Code	Supervisor's Name:	Reason for leaving:	

May we contact your current employer?

Yes \_\_\_\_\_ No \_\_\_\_\_

List chronologically all of your residences for the last 10 years (include addresses while attending school if away from home and military address including off base housing)

Dates:		Street Address (include any Apartment or Lot Numbers)	City	State
From:	To:			

List any professional, trade groups, organizations, machinery/tools operated in past, or special skills you have been involved in that you consider relevant to your ability to perform this job:

Were you in the Military?    Yes    \_\_\_\_\_    No    \_\_\_\_\_    Branch: \_\_\_\_\_

Do you have any experience from your military service that would be relevant to the job(s) for which you are applying?

If yes, please explain: \_\_\_\_\_

**VETERAN'S PREFERENCE:** Pursuant to Iowa Code Sections 35C.1 and 35.1, Story County recognizes preference for certain veterans. If you are eligible for veteran's preference consideration in employment, please list your branch and dates of service: \_\_\_\_\_

A copy of your DD214 and proof of disability (if applicable) must be included with this application in order to receive veteran's preference in employment with Story County.

Have you ever been convicted of a felony? (For purposes of this questions, convicted includes plead guilty, plead no contest or been given a deferred sentence of judgment.) Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of any offense other than simple misdemeanor traffic violations? Yes \_\_\_\_ No \_\_\_\_

If yes to either of the above questions, attach a copy of the charge(s) and disposition of the charge.

Have you had any moving violations? Please describe:

---

---

---

**Note:** A conviction will not automatically disqualify an applicant for a particular job and that the type and seriousness of the crime, the frequency of violations, the date of conviction, and the applicant's entire work and educational history will be considered.

Have you been given a job description or had the requirements of the job explained to you? Yes \_\_\_\_\_ No \_\_\_\_\_

Answer the questions in this box only if you have received a copy of the job description or had the requirements of the job thoroughly explained to you.

Do you understand the requirements? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you perform the requirement of this job with or without reasonable accommodations? Yes \_\_\_\_\_ No \_\_\_\_\_

If the job requires, do you have the appropriate valid driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

DL#: \_\_\_\_\_ Type: \_\_\_\_\_ State of License \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**I understand:**

That completing this application does not constitute an offer of employment.

That in connection with the application process, Story County may conduct a background investigation and request information from my past employers, education institutions, personal references, and any public or private agencies that have issued me either a professional or vocational certification or license. I also understand that such investigation may also include but is not limited to any criminal records and motor vehicle driving records. I have read Story County's Applicant Background and Employee Investigation Policy, which I fully understand and which indicates that if Story County utilizes the services of a consumer reporting agency, Story County follows the provisions of the Fair Credit Reporting Act and will provide a notice to the applicant and request a separate Release of Information form from the applicant.

That I may be required to complete a medical history form and may be required to be examined by a medical and mental health professional designated by Story County at the post-offer stage. I agree that Story County shall be entitled to receive full and complete reports and records governing any medical, mental health or related examinations, and I authorize any and all such doctors, medical and mental health examiners, and clinics/hospitals to give to Story County full and complete reports and records covering such examinations.

That use of illegal drugs is prohibited during employment and that I may be required to undergo and successfully pass a screening for alcohol and/or drugs that is included in a post-offer pre-employment physical examination. I also understand that, if employed, I may be required to submit to an alcohol or drug screening according to state law. I agree that Story County shall be entitled to receive full and complete reports and records governing any alcohol or drug screening, and I authorize any and all such doctors, medical examiners, and clinics/hospitals to give to this organization full and complete reports and records covering such examinations.

That if I sustain any injury or illness while in the employment of this organization, I agree that Story County shall be entitled to receive full and complete reports and records governing any medical or related examinations, and I authorize any and all such doctors, medical examiners, and clinics/hospitals to give to Story County full and complete reports and records covering such examinations, condition, care and treatment related to or resulting from the alleged illness or injury.

That if employment is obtained under this application, I will comply with all rules and policies of the organization. I agree to be responsible for the organization's property and equipment issued to me by the organization until returned by me. I agree to pay for property and equipment not returned, and authorize the organization to withhold an amount equal to the value of the property not returned by me from my final pay.

That this employment application and any other employee related documents are not contracts of employment and that Story County follows an "employment at-will" policy that an individual who is hired may voluntarily leave employment or may be terminated by the employer at any time for any or no reason. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee.

That this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. The exception would be if YOU HAVE TESTED AND SUCCESSFULLY QUALIFIED FOR THE POSITION LIST, SAID LIST WHEN COMPLETED IS GOOD FOR TWO YEARS OR UNTIL DEPLETED.

**Smoking Ban Notice:**

Applicants for employment with Story County are advised that smoking is banned by state law (Iowa Code Chapter 142D) on all County grounds and in all County facilities which includes motor vehicles and equipment. Applicants are further advised that their job duties may include entering into areas where smoking is not regulated and where smoking is occurring. (Iowa Code Section 142d.6(2))

I have provided complete and truthful information to Story County regarding all sources of information about my past employment, education, licensure, certification, criminal conviction record, as well as any other information requested in the employment application, and have been fully informed that any misrepresentations or material omissions concerning such information will be grounds for denying my application, withdrawing any offer of employment, or disciplinary procedures up to and including termination.

I have carefully read all the statements regarding requests, authorizations, consents and releases and have voluntarily agreed to the terms to assist Story County in evaluating my qualifications for employment and in meeting the business necessity of hiring honest, trustworthy, reliable and non-violent employees who do not pose a risk of serious harm in the workplace.

I understand that with the exception of any credit or investigative reports under Fair Credit Reporting Act, all information and documents generated, received or maintained by Story County during, or as a result of, its investigation will be maintained as confidential information.

---

Signature of Applicant:

---

Date:



# STORY COUNTY SHERIFF'S OFFICE

## BACKGROUND & INVESTIGATION RELEASE FORM

As part of our hiring background and investigation, we may obtain consumer reports to prepare an investigative consumer report. The investigative consumer report may consist of contacting all listed prior employers to verify your employment history. It may also include, but not be limited to, credit information reports, criminal history reports and driving history records. Under the provisions of the Fair Credit Reporting Act (15 USC at 1681-1681u) as amended, before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your Rights Under the Fair Credit Reporting Act.

Under the provisions of the Fair Credit Reporting Act, 15 USC, Section 1681 et seq., the Americans with Disabilities Act and all applicable federal, state, and local laws, I hereby authorize and permit Story County to obtain a consumer report and/or an investigative consumer report which may include the following:

1. My employment records;
2. Records concerning any driving, criminal history, credit history, civil record, workers' compensation (post-offer only) and drug testing;
3. Verification of my academic and/or professional credentials; and information and/or copies of documents from any military service records.

I understand that an "investigative consumer report" may include information as to my character, general reputation, personal characteristics, and mode of living which may be obtained by interviews with individuals with whom I am acquainted or who may have knowledge concerning any such items of information.

I agree that a copy of this authorization has the same effect as an original.

I hereby release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization, as well as Story County from liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information.

I understand and acknowledge that under provision of the Fair Credit Reporting Act I may request a copy of any consumer report from the consumer reporting agency that compiled the report, after I have provided proper identification.

I hereby authorize Story County to obtain and prepare an investigative consumer report as set forth above, as part of its investigation of my employment application. This authorization shall remain in effect over the course of my employment. Reports may be ordered periodically during the course of my employment. **I will also provide a copy of my driver's license for your files.**

Full Name \_\_\_\_\_  
(please print clearly)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **NOTICE OF APPLICANT BACKGROUND CHECKS AND EMPLOYEE INVESTIGATIVE POLICY**

Story County recognizes the importance of maintaining a safe workplace with employees who are honest, trustworthy, qualified, reliable and non-violent, and do not present a risk of serious harm to their co-employees or others. For purposes of furthering these concerns and interests, before hiring an individual, Story County reserves the right to investigate the individual's prior employment history, personal references and educational background, as well as other relevant information that is reasonably available to Story County. In hiring for certain positions, Story County may review an applicant's credit report and criminal background, if any.

If Story County utilizes the services of a consumer reporting agency, the Company follows the provision of the Fair Credit Reporting Act and will provide a notice, and request a separate release of information form. Consistent with legal requirements, Story County reserves the right to exclude any applicant from consideration for employment, where the applicant refuses to sign the release form as requested.

In addition, Story County may occasionally find it necessary to investigate current employees, where behavior or other relevant circumstances raise legitimate questions concerning work performance, reliability, honesty, trustworthiness, or potential threat to the safety of co-employees or others. Employee investigations may, where appropriate, include credit reports and investigation of criminal records, including appropriate inquiries about any arrest for which the employee is out on bail. Employees subject to such investigations are required to reasonably cooperate with Story County's lawful efforts to obtain relevant information, and may be disciplined up to and including discharge for failure to do so.

All employees are strongly encouraged to immediately report any incidents of potentially threatening, harmful or criminal behavior of co-employees, supervisors, customers, clients or visitors that may negatively affect the safety, security, productivity or financial interests of Story County or its workplace to Human Resources.

Story County's separate policies regarding Company Property, Security, Privacy and Searches, and its Drug-Free Workplace Policy, provide further information about Story County's discretion to investigate employees and mandatory employee reporting obligations. After receiving an offer of employment, any job applicant who wishes to review these policies before deciding whether to accept employment may do so by contacting Human Resources.

Addendum:

**STORY COUNTY SHERIFF'S OFFICE**  
**INFORMATION NEEDED FOR POST OFFER, PRE-EMPLOYMENT**  
**BACKGROUND CHECK**

(To be kept separate from the employment application)

In order to conduct a post-offer, pre-employment background check, the county requests the following information:

Legal Name \_\_\_\_\_

Other name (s) used:

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Scars marks or Tattoos: \_\_\_\_ Yes \_\_\_\_ No \*If so please list: \_\_\_\_\_

\_\_\_\_\_

Has your driver's license ever been suspended, revoked or denied in this or any other state? \_\_\_\_ Yes \_\_\_\_ No

Have you ever been a Plaintiff or Defendant in any court action (including divorce)? \_\_\_\_ Yes \_\_\_\_ No

If so explain by furnishing dates, location, court, names of parties involved, nature of action and final

disposition: \_\_\_\_\_

\_\_\_\_\_

Are you willing to take a polygraph examination (lie detector) if requested? \_\_\_\_ Yes \_\_\_\_ No

Are there any incidents in your life not mentioned herein which may reflect on your ability to perform the duties which you may be called upon to undertake? \_\_\_\_ Yes \_\_\_\_ No (If yes please you may use space available or attach a copy of your reason to this form)